PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

					, , , , , , , , , , , , , , , , , , ,			111
INSTRUCTIONS: This fappropriate. All further coindicated unless corrected maintenance fee notification	orrespondence including below or directed other	or transmitting the g the Patent, adverwise in Block	e ISSU ance or l, by (a	JE FEE and PUBLICATION of more and notification of more specifying a new corresponding to the second	pondence address;	and/or	(b) indicating a separ	ate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					s) Transmittal. The ers. Each additiona	is certifi l paper.	cate cannot be used to	domestic mailings of the r any other accompanying t or formal drawing, must
20792 7590 11/14/2008					CEI	RTIFIC	ATION OF TRANSM	IISSION
MYERS BIGEL	I he	ereby certify that t	his corre	espondence is being tra	insmitted via the Office			
PO BOX 37428 RALEIGH, NC 2	7627		ctronic filing syste ademark Office.	m in ac	cordance with § 1.6(a)	(4) to the U.S. Patent and		
				Ca	ra/L. Rose			(Depositor's name)
		 (and the			(Signature)		
				Fe	ebruary/9,	2009)	(Date)
APPLICATION NO.	PLICATION NO. FILING DATE		FIRST NAM		VENTOR		RNEY DOCKET NO.	CONFIRMATION NO.
10/779,907 02/17/2004				Robert D. Black 9099-18 8994				
TITLE OF INVENTION: FLUORESCENT ANALY		CENCE SENSOR	ts, sy:	STEMS, AND RELATED	METHODS OPE	RATIN	G IN CONJUNCTION	4 WITH
APPLN. TYPE	SMALL ENTITY	ISSUE FEE D	JE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO Ves	\$1510		\$300	\$0		\$1810	02/17/2009
EXAMINER		ART UNIT		CLASS-SUBCLASS				
RAMIREZ, JOHN	3737		600-300000	_				
1. Change of corresponder	nce address or indication	n of "Fee Address	" (37	2. For printing on the p	, -		Myorc	Rigel Siblev
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, [Myers, Bigel, Sibley & Sajovec, P.A.]				
Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form				(2) the name of a single registered attorney or a	agent) and the nan	nes of u	o to	
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.				
3. ASSIGNEE NAME AN	ND RESIDENCE DATA	A TO BE PRINTE	ED ON	THE PATENT (print or type	pe)			has been filed for
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Sicel Technologies, Inc. Morrisville, North Carolina								
		categories (will a	ot be p	rinted on the patent):	Individual 🗓 C	orporat	on or other private gro	up entity Government
4a. The following fee(s) a	are submitted:		4	b. Payment of Fee(s): (Plea	ase first reapply a	ny prev	viously paid issue fee s	shown above)
XX Issue Fee		A check is enclosed.						
	o small entity discount p	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 500220 (enclose an extra copy of this form).						
☐ Advance Order - #	of Copies			overpayment, to Depo	osit Account Numb	per <u>500</u>	1220 (enclose a	n extra copy of this form).
5. Change in Entity Stat	cus (from status indicate s SMALL ENTITY stat		27.	☐ b. Applicant is no lor	nger claiming SMA	LL EN	TITY status. See 37 CI	FR 1.27(g)(2).
NOTE: The Issue Fee and interest as shown by the r	1 Publication Fee (if red	uired) will not be	accept	ed from anyone other than				ne assignee or other party in
Authorized Signature	Atrick	· ad	Λι		Date <u>Feb</u>	ruary	, 9 , 2009	
Typed or printed name	Jalie H. R	Registration No. 40,142						
This collection of informan application. Confident submitting the completed	ation is required by 37 (itality is governed by 35 application form to the	CFR 1.311. The in 5 U.S.C. 122 and e USPTO. Time with should be s	oformat 37 CFF will var	ion is required to obtain or R. 1.14. This collection is es- y depending upon the indi- he Chief Information Office	retain a benefit by stimated to take 12 vidual case. Any c cer. U.S. Patent and	the pub minute commen d Trader	lic which is to file (and s to complete, including ts on the amount of the mark Office, U.S. Depart	by the USPTO to process) g gathering, preparing, and me you require to complete artment of Commerce, P.O.

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Confinetce, T.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.